

ALLEGANY COUNTY

Selection of Focus Area

On August 20, 1999, the Mountainside Community Coalition's Health Improvement Committee reviewed health data from the Maryland Department of Health and Mental Hygiene's "Consensus Indicators for Community Health," data for Allegany County's Annual CORE Health Plan, the Mountainside Community Coalition's Health Report Card, and the Report for the Western Maryland Economic Development Task Force. The Committee identified 12 health concerns and used the APEX process to identify access to health care as the number one problem in Allegany County (for the uninsured or underinsured, in the 19-64 and 65 years and older age groups). The other health concerns in descending rank are:

- Dental Disease
- Elder Care
- Heart Disease
- Cancer, Smoking
- No Mammography
- Substance Abuse
- Mental Illness
- Early Childhood
- Teen Pregnancy (less than 20 years old)
- Chronic Obstructive Pulmonary Disease

DEMOGRAPHIC OVERVIEW

Estimated Population, by Race – 1998

| | |
|-------------|--------|
| Total | 71,330 |
| White | 96.6% |
| Other | 3.4% |

Estimated Population, by Age – 1998

| | | | |
|---------------|--------|-------------|--------|
| Under 1 | 750 | 18-44 | 24,230 |
| 1-4 | 2,840 | 45-64 | 17,130 |
| 5-17 | 13,010 | 65+ | 13,370 |

All causes Mortality Rate (age-adjusted, per 100,000 population) 1996-1998 491.6

Infant Mortality Rate 1995-1999 5

Estimated Mean Household Income – 1999 \$40,900.00

Estimated Median Household Income – 1999 \$29,000.00

Civilian Unemployment Rate, Annual Average – 1999 7.1

Labor force (Top 4)-1995

| | | | |
|--------------------|--------|--------------------------------------|-------|
| Services | 10,400 | Government (Federal, Military) | 5,800 |
| Retail Trade | 8,200 | State & Local Government | 4,900 |

Sources: Maryland Vital Statistics, 1999
Maryland Department of Planning, 1995, 1998, 1999

Focus Area 1 - Promoting Access to Health Care for the Uninsured

Problem

Access to timely and necessary clinical preventive and primary care through proper insurance coverage is key for safeguarding good health. Data show that people without health insurance use fewer health care services, are more likely to go without needed prescriptions, and are often unable or unwilling to obtain necessary health care. The impact of the lack of health insurance on individuals and the burden placed on community resources is evidenced by people who delay care and are sicker when they enter the health care system. These sicker people often need more intensive and expensive services than those who access the health care system before they become acutely ill.

Determinants

Allegany County's poor economy poses a significant barrier to accessing quality health care. The impact of the County's poor economy is evident in high unemployment, low median income, high poverty, and a high percent of persons who are medically uninsured/underinsured.

Employment is a major factor in determining whether individuals have private insurance. While the unemployment rate for 1999 in Allegany County was 7.1, the rate for 1996-1999 averaged 8.6% compared to 4.6% for the State of Maryland.

| Unemployment Rates in Allegany County and Maryland, 1996-1999 | | | | | |
|---|------|------|------|------|---------|
| Jurisdiction | 1996 | 1997 | 1998 | 1999 | Average |
| Allegany | 8.8% | 9.8% | 8.8 | 7.1 | 8.6% |
| Maryland | 4.9% | 5.1% | 4.6 | 3.6 | 4.6% |
| Source: Maryland Department of Labor, Licensing and Regulation | | | | | |

On a related measure, the percent uninsured among Allegany County residents (<65 years old) is approximately 21.5% compared to 13.5% for the State. Moreover, many county governmental and private programs, which previously acted as a "safety net" for the uninsured, have experienced cutbacks, and their ability to provide needed supplemental assistance has been seriously threatened. For example, the Allegany County School Health Program, offering children prevention, screening and clinical services, ensures that needed health care will be received by vulnerable populations with financial and geographic access difficulties. This program is slated for significant cutbacks for FY 2001. The problem is most pressing for working persons, 19 to 64 years old who fall within 250% of poverty, and for single working mothers.

The ability to pay for care out-of-pocket or for co-insurance costs is directly tied to being paid livable wages (income levels). The 1996 median income in Allegany County was \$24,500; for the state it is \$45,500. Persons below 200% of poverty comprise 36.6% unemployment for residents of Allegany County versus 19.2% for Maryland.

Income Data for Allegany County and Maryland, 1990 and 1995

| Jurisdiction | Per Capita | Median | % Persons Below Poverty |
|--------------|------------|----------|-------------------------|
| Allegany | \$16,983 | \$24,300 | 16.5% |
| Maryland | \$24,677 | \$47,700 | 8.3% |

Source: Bureau of Census (1995 Estimates); Poverty: 1990 Census

The availability of community resources reflects alternative programs from public and private sources to ensure access to care. Major community programs that help local residents obtain needed care include Allegany Health Right, Western Maryland Health Systems (Hospital Emergency Care), Allegany County Health Department programs like School Health, Breast & Cervical Cancer Screening, Dental Services and the Maryland Health Care Foundation Grants.

Unfortunately, many of these programs have criteria limitations, or restrict access to care to low income working persons. For example, Allegany Health Right employs explicit criteria which limits participation to persons with near poverty income who have an attending physician.

Uninsured Data for Allegany County and Maryland, 1997

| Jurisdiction | Uninsured <65 Years Old | Uninsured & Unserved <65 Years Old | <200% Poverty |
|--------------|----------------------------|--|------------------|
| Allegany | 13,652 21.5% | 13,165 20.7% | 28,453 36.6% |
| Maryland | 594,377 13.5% | 507,289 11.8% | 921,499 19.2% |

Source: "Primary Care Access Plan, 1997": Tables 1b, 5 & 6, DHMH, CPHA

Objective 1 - By 2005, 90% of Allegany County residents will have access to health care through appropriate health insurance coverage (Baseline: 78.5%).

Objective 2 - By 2005, expand Maryland Children Health Insurance Program (MCHIP) coverage to include parents of children up to 300% of federal poverty level (Baseline: Children: 92%; Parents: 0%).

Objective 3 - By 2005, establish a single point of contact for the uninsured in need of medical and pharmacological care.

Action Steps

- ⇒ Support the Western Maryland Economics Task Force in their efforts to develop jobs that offer livable wages and provide affordable health insurance benefits.
- ⇒ Promote collaboration among Coalition members to serve the uninsured such as Expansion of Health Right Coverage/Community Clinics, and by creation of a central point for needy persons to obtain medical/pharmacy services (the Department of Social Services could serve as the focus for this referral point).
- ⇒ Explore grants for developing infrastructure to cover uninsured.
- ⇒ Explore options for group purchase of low cost health insurance.
- ⇒ Advocate for legislation to expand MCHIP to include family members.
- ⇒ Advocate for legislation to increase MD Pharmacy Assistance Threshold (Baseline: \$804/Individual; \$870/Couple).

Partners

Allegany County Health Department • Allegany Health Right • Department Of Social Services • Maryland Health Care Foundation • Western Maryland Area Health Education • Western Maryland Health System • United Way

Related Reports

Russell, Terry J. (1998). *Western Maryland regional health and human services survey, 1998*. Survey. Report for the Allegany County United Way and the Western Maryland Health System.

Focus Area 2 - Oral Health

Problem

Oral disease includes dental caries (infectious disease of the tooth surface), periodontal disease (diseases of the gum, jaw-bones, and tissue supporting the teeth), and oral diseases from cancer and other cranio-facial conditions. Oral disease, if unattended, leads to needless pain, suffering, poor nutrition, difficulty speaking, chewing, and/or swallowing, loss of self-esteem, decreased economic/school productivity, and increased cost of care.

Dental caries is the most common infectious disease of U.S. children. Dental caries, gingivitis and periodontal disease also continue to plague many adult Americans. Without doubt, the major burden of oral disease rests on those who are most disadvantaged, and therefore most at risk to be unable to access dental services. Lack of ability to pay for dental services, lack of transportation to needed services, and lack of understanding of the importance of routine preventative dental care all contribute to an increased rate of dental disease.

| Selected Dental Health Indices | | | |
|--|------------|------|--------|
| Indices | Allegany * | MD** | USA*** |
| # Teeth with Decay ^(a) | | | |
| 6-7-Year-Old | 5 | 3 | 1 |
| 17-Year-Old | N/A | 5 | 4 |
| (Total Cumulative Decay) | | | |
| Population in Municipal Water Systems with Fluoridation ^(b) | ^0% | 85% | 56% |
| Sealant use among School Children | 8% | 20% | 19% |
| ^(a) Decayed, Missing, or filled teeth (DMF) ^(b) CDC Fluoridation Fact Sheet, As of 12/93 Sources: *Allegany Co. H. Dept. Dental Screening Records (1991-98) **DHMH 1995 Survey of the Health Status of Maryland School Children; ***1991 NHANES III Study | | | |

Tooth decay, gum disease and other dental diseases are prevalent in Allegany County. County children have the worst record for the prevalence of tooth decay among the 24 Maryland jurisdictions. Two major factors contributing to this condition are the absence of fluoridation in public water systems and poor access to dental care. Additionally, there is sporadic use of oral fluorides and dental sealants even in the absence of public water fluoridation. Public water fluoridation is currently not available to local residents. Almost 10 years ago the county, led by the medical community, tried to get fluoridation for the city of Cumberland and succeeded by vote, but the decision was overturned a month later through a referendum during a mayoral election.

There is inadequate available personal information on good dental hygiene. Residents, especially those enrolled in Managed Care Organization (MCO) Medicaid programs, experience poor access to routine clinical dental preventive care. Many dentists do not participate in Medicaid given the low reimbursement level and "No Show" reputation of Medicaid patients.

According to local dental providers, the prevalence of dental disease in Allegany County is alarming. Despite attempts to educate the community through prenatal courses at the hospital system and in Women, Infants, and Children (WIC) clinics, there are numerous cases of early childhood caries and severe inflamed dentition as a result of delayed dental care. Moreover, other local norms, such as a high prevalence of smokers--particularly among teens, poor nutritional choices, and the low value placed on dental care given competing financial demands for other basic necessities, contribute to the poor dental health status of Allegany County residents.

The ability to get screening and treatment is directly related to finances, manpower, geographic, and cultural barriers. Access to dental care for residents in Allegany County is problematic because of low income and high percentage of persons who are uninsured. The percent of persons without health insurance in Allegany County is about one and half times that of the State, and the median income for Allegany County is considerably lower than the State.

The community's educational level, as measured by the number of high school graduates and persons with college educations, is lower than the State as a whole. Local dental providers cite that general dental education among residents is quite poor. There is widespread disregard for good dental hygiene, use of dental sealants and routine visits to dental providers.

| Education Data | | |
|--|---------|----------|
| Percent Of Individuals >25 Years Old: | Alegany | Maryland |
| With No High School Diploma | 29.0% | 21.6% |
| With No Bachelor Degree | 82.2% | 68.3% |
| Source: U.S. Bureau of Census, 1990 | | |

Objective 1 - By 2005, 40% of Allegany County residents will have access to dental health care through appropriate insurance coverage.

Objective 2 - By 2005 increase dental sealant use by 20% among all children at age eight in Allegany County.

Objective 3 - By 2005, 80% of the population served by the public water system in Allegany County will receive optimal levels of fluoridation.

Action Steps

- ⇒ Improve communications by presenting data on the local prevalence of dental disease to the Western Maryland Economic Development Task Force.
- ⇒ Identify resources to pay the cost of conducting education and preventive care with Western Maryland Area Health Education Center (WMAHEC), the Allegany County Health Department, Maryland Health Care Foundation, Maryland Office of Dental Health, Maryland Physicians Care, Allegany Health Right, and the County United Way.
- ⇒ Increase access to dental providers for treatment and prevention services for low income residents through grants and collaborative programming among local providers.
- ⇒ In conjunction with the Western Maryland Area Health Education Center recruit dentists, especially for those who serve low income persons.
- ⇒ Target vulnerable population subgroups for delivering educational and screening services like teenage females, and Head Start clients.
- ⇒ Advocate fluoride in local public water systems in collaboration with the Allegany-Garrett Dental Society, Rotary Club and others.

Partners

Allegany County Health Department • Allegany-Garrett Dental Society • Allegany Health Right • Allegany Office of Children, Youth and Families • Department of Social Services • Head Start • Rotary Club • Western Maryland Area Health Education Center • Western Maryland Economic Development Task Force • Women, Infants and Children

Related Reports

Maryland Department of Health and Mental Hygiene; Office of Child Health; Department of Pediatric Dentistry; University of Maryland Baltimore College Dental School. (1995). *A survey of the oral health status of Maryland's school children, 1994-95.*

Cross-Reference Table for Allegany County

See Also

| | |
|-----------------------------|-----|
| Access to Health Care | 24 |
| Oral Health | 107 |